## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 er Fax (571) 273-2885

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SMALL ENTITY

NO

Diehl Servilla LLC 77 Brant Avenue Suite 210 Clark, NJ 07066

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TOTAL FEE(S) DOI

\$1510

DATE DUE

08/18/2010

APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 11/10/2000 Raymond P. Warrell, Jr. GEN0008-01US 4982 09/709 170

PUBLICATION FEE

\$0

TITLE OF INVENTION APPLN. TYPE

nonprovisional

EXAMINER ART UN		ART UNIT CLASS-SUBULASS			
Change of correspondence address or indication of *Fee Address* (37 CFR L563).    Change of correspondence address for Change of Correspondence Address form P10-SB 122) attached.    Tree Address* indication for *Fee Address* Indication form P10-SB 147; New O-M20 or more recent) altached. Lse of a Customer Number is required.		2. For printing on the patent front page, list		Diehl Servilla LLC	
		(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
				2_	
				3_	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PUFASE NOTE. Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Genta Incorporated Berkeley Heights, NJ 07922

☐ Individual ☐ Corporation or other private group entity ☐ Government Please check the appropriate assigner category or categories (will not be printed on the patent):

4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed

Publication Fee (No small entity discount permitted) Payment by credit card Form PTO 2038 is attached

Advance Order - # of Copies\_

ISSUE FEE

\$1510

If the Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Donna R. Fugit, Reg. #32135/

Date July 21, 2010

Typed or printed name Donna R. Fugit

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